



INFORMATION LEAFLET FOR MOTHERS EXPRESSING BREAST MILK

Our Lady's Children's Hospital, Crumlin (OLCHC) encourage mothers to provide breast milk for their babies when they are in hospital. All babies whether well or sick benefit from breast milk. There are factors in breast milk that may help prevent infections. Breast milk is very easy for your baby to digest and specifically designed to meet each baby's different needs.

When a baby is sick or born prematurely they may not be strong enough to get all their nourishment at the breast. At this time you will need to express your breast milk for your baby. This leaflet should give you guidance on how to do this.

.....where children's health comes first

Created by: OLCHC Staff, March 2011

Table of Contents:

Frequently Asked Questions	
Why should I express breast milk for my baby?	3
What does expressing breast milk mean?	3
How do I express breast milk?	3
Which expressing method do I choose?	4
Is it better to hand express or use the breast pump to express?	4
How do I do 'Hands on Pumping (HOP)'?	4
Where can I express breast milk in the hospital?	4
How soon can I start expressing?	4
How do I prepare to express?	4
How do I stimulate the 'let down' reflex just before expressing?	5
What do I need if I want to express?	5
Do I wash my hands before expressing, and how?	5
How do I hand express?	6
When and how do I clean and sterilise expressing equipment?	6
How do I express with a breast pump?	7
How do I know if the breast pump funnel fits my nipple correctly?	7
How often should I express?	8
How do I increase my breast milk supply?	8
Are there ways that I can establish a good breast milk supply?	8
What is Skin-to-Skin Contact / Kangaroo Care?	9
How much should I express?	9
Can I express breast milk from both breasts at the same time?	9
My breast milk supply has reduced, why?	9
How long should I express each time?	10
Do I have to measure the volume of breast milk I expressed?	10
How do I label the expressed breast milk bottles?	11
I am taking medications – what should I do?	11
My nipples are sore from using a breast pump. Why did this	
happen and what should I do?	11
Should I try to stimulate my baby's suck when they are not	
feeding from the breast?	11
What do I store the breast milk in?	12
What do I need to know when storing breast milk?	12
How will my baby receive breast milk?	12
How do I defrost breast milk?	12
What do I need to know when transporting fresh / frozen	
breast milk to and from the hospital?	12
My baby is starting back on feeds, which breast milk will they get?	12
Why does my breast milk need to be fortified?	13
Will I always have to tube feed my baby?	13
What do I do with extra breast milk?	13
What is a Human Milk Bank?	13
How do I wean correctly?	13
How will I look after myself while expressing?	14
Renting or buying a breast pump	14
Reference List	15
List of Useful Breastfeeding Literature and websites	15
Other Useful Breastfeeding Websites	15
Notes	16

FREQUENTLY ASKED QUESTIONS

Why should I express breast milk for my baby?

The breast milk you provide for your baby is easier to digest and better suited to the needs of your baby than any other milk and particularly for premature babies. Breast milk is far more than food; it is more like a first vaccination. It is very rich in antibodies to fight germs your baby may come in contact with, so each drop is precious. It can protect against infection as babies who receive breast milk have fewer colds, diarrhoea, allergies and ear infections. While your baby is sick, they may be unable to feed directly from the breast or their feeding pattern may change. Therefore, in order to establish and/or maintain your breast milk supply for when they are well enough to feed again, you should express your beast milk.

What does expressing breast milk mean?

Expressing breast milk means squeezing milk from your breasts, either with a manual or electric pump or by hand. It is the only way, apart from breastfeeding itself, which releases breast milk. Once you express the breast milk, you can store it in bottles or containers to feed your baby at a later date.

How do I express breast milk?

You can express by the following methods:

Breast pumps

- With **manual hand-held pumps**, suction is created by squeezing a handle, which can be tiring after awhile. They are a cheaper option and are easily available to buy in your local pharmacy.
- Electric pumps are available in either hospital grade or hand-held versions.
 - **Electric hospital grade pumps** are a good choice if you have to express for a long time or if expressing more than a couple of times a day. There are several types, and most can be adapted to allow single or double pumping.
 - These pumps are expensive to buy but can be rented for home use. (See pg. 14)
 - Medela Symphony is the electric (hospital grade) breast pumps available in OLCHC.
 - **Electric hand-held pumps** are good for expressing for short periods of time or if expressing the 'odd' time. They are a cheaper option and are easily available to buy in your local pharmacy. They are available in battery or mains operated versions.
- Information sheets are attached to the electric (hospital grade) breast pumps within OLCHC about using the breastfeeding pump, and how to assemble, clean and sterilise the expressing sets.
- 'Hands on Pumping' is a combination of both breast compression/breast massage while using a electric hospital grade pump (See pg. 4)
- **Hand expressing** is the most basic way of expressing and is an important skill to learn as it provides you with a way to relieve fullness or to express breast milk for your baby in any situation. It is also a convenient and cheap way to express.

Which expressing method do I choose?

Different methods of breast milk expression suit different mothers in different situations, so you should choose the one or several methods that best suit your needs and situation. Seek advice from your baby nurse to help you choose.

Is it better to hand express or use the breast pump to express?

Research has suggested that using a combined method of 'Hands on Pumping' (HOP) (Breast compression and breast massage) while pumping using a hospital grade electric pump will ensure you produce more breast milk.

• How do I do 'Hands on Pumping (HOP)'?

'Hands on pumping' involves using **breast compression** and **breast massage** while using a breast pump. This technique has shown to increase the amount of breast milk mothers produce.

- **Breast compression** consists of support your breast with your hand by placing your thumb on the upper side of your breast and your fingers on the other, close to your ribs. Squeeze the breast to increase the internal pressure of the whole breast.
- Do not roll the fingers along the breast, just squeeze and hold firmly (without causing discomfort).
- You should see some extra milk spurting into the funnel.
- Release the pressure when the flow slows again and repeat moving around the breast. When the flow of breast milk has stopped turn off the breast pump,
- Massage your breasts for 1-2 minutes and express any remaining milk either by pumping or hand expressing.

For this to be possible while double pumping, you may need to adapt a bra or buy a specially designed one (available to buy from http://www.onceborn.com) to hold the funnels leaving both your hands free to do HOP.

Where can I express breast milk in the hospital?

You can express breast milk in your **baby's room**, in an **expressing room** where available on your babies ward (St. Peter's Ward, Nazareth Ward), **parents rooms** (St Theresa's Ward, PICU1, PICU2), in **parent's accommodation**, or at **home**.

• How soon can I start expressing?

Ideally, the sooner you start expressing the better, as your breasts receive the message from your brain to make breast milk as soon as your baby is born. If your baby cannot start breastfeeding within the first few hours of birth, breast milk should be expressed. This is best done in the first few days of birth by hand expressing

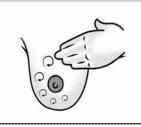
• How do I prepare to express?

Whether you are expressing by hand or by a pump, you need to stimulate your breasts to release breast milk. The release of milk from the breasts is called the 'let down' reflex. Your baby stimulates the 'let down' reflex by starting to suckle on your breast. So if you are expressing, you must use other ways to stimulate the 'let down' reflex.

How do I stimulate the 'let down' reflex just before expressing?

Give yourself plenty of time, do not feel rushed. Choose a comfortable seat and private place so that you can relax while expressing. The 'let down' reflex can be stimulated by:

- Massage your breasts gently with your fingers. Massage in small circular motions around each breast from the chest towards the nipple. There is no right or wrong way to massage.
- Stroke your breasts from the chest towards the nipple with a light tickle-like stroke.
- Lean forward and shake your breasts gently.
 - Warm moist compress such as a 'face' cloth' can be placed on the breasts



Massage



Stroke



Shake

What do I need if I want to express?

- 'Expressing breast milk' bottle (Sterile)
- 'Expressing breast milk' label
- Hand washing facilities

If expressing with a pump:-

- Expressing set (Clean and Sterile)
- Breast pump (Clean)
- If expressing by hand:-
- Bowl / Container (Clean and Sterile)

• Do wash my hands before expressing, and how?

You must wash your hands before handling milk and breast equipment. expressing This is to prevent dirty hands contaminating the breast milk.

Wash your hands with either:-

 soap and water (if they appear dirty)

or

 apply alcohol gel (if they appear clean) using Steps 1-7.



Step 1





Step 2



Step 3



Step 4



Step 5



Step 6

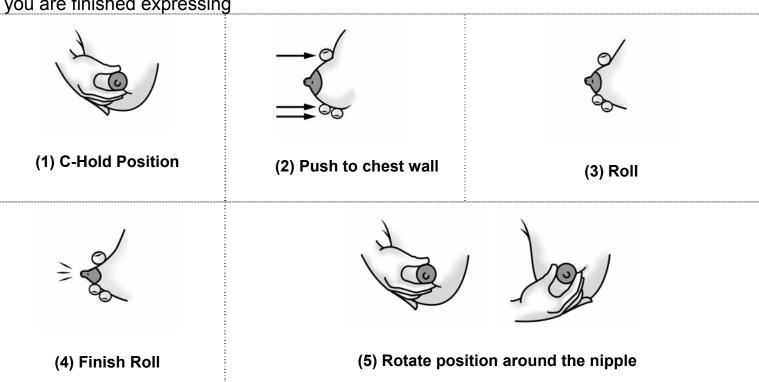


Step 7

• How do I hand express?

- **Position** the thumb and 1st two fingers in a **'C' shape** about 1 -2 inches behind the nipple
- Push the thumb and two fingers into the chest wall
- **Roll** the thumb towards the nipple (like taking a thumb print), changing pressure from the middle finger to the index finger.
- Aim the nipple into a bowl / container to collect the breast milk
- Repeat the position, push, roll action until the milk duct is empty
- Rotate the thumb and finger position ('C' shape) around the breast until the breast is empty

Transfer the breast milk from the bowl into a sterile 'expressing breast milk' bottle when you are finished expressing



When and how do I clean and sterilise expressing equipment?

All new <u>expressing sets</u> (for breast pumps) or <u>bowl / container</u> (if hand expressing) must be:

- washed in warm soapy water.
- then sterilised in either :-
 - an electric steam steriliser
 - a sterilising unit containing water and a sterilising tablet 'acticlor'.
- This must be done between each expression.

You will receive your own expressing set or bowl (do not share with others).

The expressing set tubing does not need to be sterilised, but once visibly clean they can be stored in a clean plastic container after each use.

Breast pumps are shared by mothers in the hospital. Pumps must be washed with warm soapy water and dried with a paper towel before and after use.

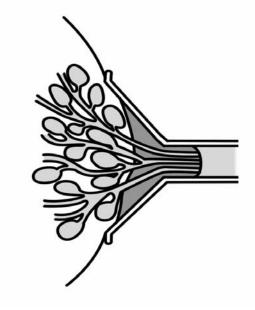
How do I express with a breast pump?

- Assemble the expressing set once cleaned and sterilised (as above), connect the tubing to the pump and the funnel.
- Sit in a comfortable chair with your back supported.
- It may help to support your breast with your hand by placing your thumb on the upper side of your breast and your fingers on the other, close to your ribs (this position will help perform **Breast compression** for the 'HOP' Method). This will also help to centre the nipple and areolar area into the funnel.
- Turn on the breast pump. The pressure will be at a minimum setting, gradually increase the pressure on the breast pump up to the maximum comfortable level for you.
- Continue to express until the flow of breast milk slows down and stops. Massage your breasts for 1-2 minutes and express any remaining milk either by hand expressing or pumping
- Pump for a further 1-2 minutes.
- Turn off the breast pump.
- Remove the funnel.
- It is important to ensure that the breast pump is turned off prior to removing the funnel to avoid hurting your breast.
- Continue to the other breast if single pumping.
- The Medela Symphony breast pump uses two phase expression to mimic a baby's natural breastfeeding rhythm, rapid stimulation (Phase 1) followed by slower expression (Phase 2). It is normal for the breast pump sound to change and sound slower during Phase 2.

• How do I know if the breast pump funnel fits my nipple correctly?

- When the breast pump is turned on, the:
 - Nipple should move freely in the breast pump funnel and be pain free
 - Areolar tissue is pulled into the pump funnel
 - Breast should feel:-
 - a gently rhythmical motion
 - empty after expressing.

There are different pump funnel sizes available from Medela. If the regular pump funnel does not fit your nipple correctly, talk to your nurse. (Pump funnels are available in the Material Management Department, OLCHC)



Breast pump funnel

How often should I express?

You will need to express as often as your baby would need to feed

- If your baby is a newborn express milk 8-10 times in 24 hours. Try to avoid leaving gaps of more than three hours during the day. At night, it is best to express every 5-6hours. While it is difficult to get up at night, you naturally produce more prolactin (the milk producing hormone) at night so by expressing once over night it will ensure you have a higher breast milk production during the day also. This will help keep a breast milk supply that satisfies your baby's needs. The more often you express the more you produce and by emptying your breasts they will make more breast milk.
 - After a few weeks when you produce about 750 900ml per day, you can cut back on the number of times you express per day while also maintaining your milk supply.
- If your baby is not a newborn, express at regular intervals or at the same times as your baby would usually breastfeed.
- If your baby is starting to breastfeed after receiving expressed breast milk for a while, you may need to continue expressing breast milk until your baby is totally established on breast feeds, this will keep your breast milk supply.
 - Most two week old babies go through a growth spurt and feed frequently for 24-48hours to increase their mothers' breast milk supply. Researchers advise mothers expressing breast milk for sick or pre-term infants to express more frequently (hourly for about 8 hours) during this time. This mimics the increased frequency of feeding by breastfeeding babies so as to increase mother breast milk supply. We understand that this is time consuming and difficult when you have a baby who is sick but it will increase your breast milk supply to meet your baby's needs. If you do not have much time it is better to pump for short periods (5-10minutes) more frequently than to leave long gaps between pumping sessions.

Can I express breast milk from both breasts at the same time?

Yes, this is also known as 'double pumping' from both breasts at the same time. It can save you a lot of time and work. Research has shown that double pumping may increase your breast milk supply, especially if your baby is premature.

• How do I increase my breast milk supply?

The following tips may help:

- Get plenty of rest.
- Choose a comfortable seat and private place so that you can relax while expressing.
- Do not feel rushed while expressing.
- Make time for meals, snack regularly, have plenty of drinks available.
- Express more often if necessary (especially for mastitis or blocked ducts)

• Are there ways that I can establish a good breast milk supply?

In addition to the above points of 'how often should I express?', the following tips may help, such as:-

- having your baby near by or a photo of your baby,
- having a baby grow or blanket that has the scent of your baby near you

- breast massage
- Kangaroo care / Skin-to-Skin Contact (See below)

It can helpful to express in short bursts. Try expressing either every hour (15 minutes each session) or every 2 hours (30 minutes each session) for an 8 hour period.

What is Skin-to-Skin Contact Kangaroo Care?

Skin-to-skin contact or 'Kangaroo Care' means holding and cuddling your baby as much as possible. Your baby will be dressed only in a nappy (if possible) placed on your chest, skin to skin, inside your clothing. This will help stimulate your breasts to make more breast milk. It can also help stimulate your immune system to make more antibodies in your breast milk. Ask your nurse if and when you can do this.



• How much should I express?

How much you need to express depends on your reason for expressing. There will only be a little breast milk for the first few days after your baby is born. This first breast milk is called 'colostrum'. Mothers who have delivered prematurely may produce as little as a few drops of colostrum each time they express for the first 24-48 hours (this is normal).

Later on, the amount of breast milk you express may change depending on the time of the day, and how you feel. Try not to compare yourself to others, as everyone is different.

Some mothers who are expressing regularly can quickly get 90 - 120ml from both breasts every three to four hours.

Others mothers simply cannot express such big volumes at one time, and find it easier to express small amounts more frequently (e.g. up to 30ml every 1-2 hours). A few mothers may find it difficult to express, even though they have a good supply and the baby is thriving.

If your breast milk supply is less than your baby's feeding needs, your baby will be either given some of your frozen breast milk supplies or supplemented with artificial feeds until your breast milk supply increases.

My breast milk supply has reduced, why?

Your breast milk supply may reduce for many reasons, especially if you are:

- Stressed
- Not expressing frequently enough
- Engorgement
- Mastitis or blocked ducts
- Breast pump funnels are too large or small
- Sick, unwell due to an illness

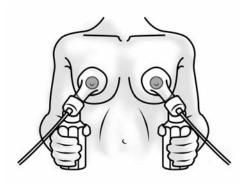
How long should I express each time?

This depends of the method of expressing you chose. Breast milk may take 1-2 minutes to flow when you start expressing.

- If single pumping: Breast milk can be continuously expressed from one breast only for a few minutes before the supply slows down or appears to stop. Breast milk should then be expressed from your other breast. Then go back to the first breast and start again. Keep changing breasts until the breast milk stops or drips very slowly.
- If double pumping: It is a faster and more effective, than single pumping, especially if expressing for longs period of time. Double pump until your breast milk flow stops and then for an extra 1-2 minute.
- **If hand expressing**: Continue to express from one breast and then move to the other breast (see single pumping instructions).
- It is important to empty your breasts as thoroughly as possible as breast milk increases in fat as the expressing time progresses.



Single Pumping



Double Pumping

• Do I have to measure the volume of breast milk I expressed?

No, but it may be helpful to keep a record of your breast milk volumes so that any decrease can be acted on (a 'Log for Mother's Expressing Breast Milk' is available from your nurse). It is best to judge your breast milk volume in a 24 hour period than each time you express as the volume of breast milk at each expression period may vary.

Log for Mother's Expressing Breast Milk

Date of expression	Time of expression	Type of Expressing	Volume (mls) per expression	Total Daily Volume (mls)	Comments

Type of Expressing: HE = Hand Expression MHH = Manuel Hand Held
EH = Electric (Hospital Grade) EHH = Electric Hand Held

How do I label the expressed breast milk bottles?

Label each express breast milk bottle using the hospital 'Expressed Breast Milk' labels, where available. Remember to include your name, baby's name, date, time expressed, hospital ID number, ward name and if taking any medication.

Baby's Name:	Frozen: Date:
Date of Birth:	Time:
Hospital Number:	Thawed: Date:
Ward Name:	Tiphe:
Expressed: Date:	Tieĥe: Do not wee after:
™e.	δ Date
Mother's Medication:	Time:
Mother's Medication:	Fortified: Yes / No
	Signature:/

Breast Milk Label

• I am taking medications – what should I do?

If a doctor has prescribed medicine for you, let them know that you are providing breast milk for your baby to ensure the medication is suitable. Remember to tell the nurse and doctor caring for your baby if you are taking any medication.

Check with the pharmacist / doctor if you need to take medication (prescription or over the counter medicine) or herbal remedies, when you are breastfeeding / expressing, as some are not recommended for mothers that are breastfeeding / expressing or may decrease your breast milk supply. If you discuss birth control with your doctor, remember to tell him/her that you are breastfeeding / expressing as this may affect the method of birth control they prescribe.

Do not forget to write the medications you are taking on the breast milk label

• My nipples are sore from using a breast pump. Why did this happen and what should I do?

Sore nipples may occur from using the breast pump for the following reasons:-

- The collection funnel of the expressing set may be too small, rubbing off the nipples. Medela have different size funnels on their expressing sets available to suit all size nipples and ensure that you centre the nipple in the collection funnel.
- If the breast pump suction is too high. It is recommended that you increase the suction pressure slowly until it becomes slightly uncomfortable and then decrease it slightly. Always stop the breast pump before removing the collection funnel.
- At the end of pumping, rub a small amount of breast milk around your nipples to prevent them becoming sore

If your nipples become sore, it may be helpful to hand express until the nipple area heals.

• Should I try to stimulate my baby's suck when they are not feeding from the breast?

Yes, this is also called 'non-nutritive sucking' and can be encouraged by:

- your little finger (clean) (this is similar to your nipple when elongated with breastfeeding)
- a soother during feeding times
- sucking directly at your breasts when they are 'empty' if your baby's condition allows.

These are good ways of encouraging the sucking experiences in your baby and may also increase your breast milk supply.

What do I store the breast milk in?

Any sterile airtight container can be used to store breast milk, as long as it can be sealed. If you are expressing breast milk for your baby in OLCHC, it should be collected and stored in a sterile plastic 'breast milk bottle', supplied by OLCHC. This bottle can attach directly to the expressing set at the time of expressing. Do not fill the bottle with breast milk; leave at least 1-2cms free at the top, as milk expands when frozen.

If not using immediately, store the breast milk in fridge/freezer.

What do I need to know when storing breast milk? Breast milk storage:

Refrigerator (2-4°C) Fresh breast milk:-48 hours Refrigerator (2-4°C) Defrosted breast milk:-24 hours

• Supplemented / fortified breast milk: - used immediately (Do not freeze).

Freezer (-20°C) (up to 3 months) Fresh breast milk:-

(Do not store breast milk in the fridge door)

There is limited space in the hospital for frozen breast milk. Breast milk expressed during your baby's first two weeks of life must be kept in the hospital and given first. If possible, store extra breast milk in your freezer at home.

How will my baby receive breast milk?

If for some reason either you or your baby cannot breastfeed, your baby can be given your breast milk in any of the following ways:

• Cup feeding

Finger feeding

- Syringe / dropperBreastfeeding supplementer
- Gastric (feeding) tube (Continuous small volumes through an electric feeding pump or larger volumes every few hours)

How do I defrost breast milk?

Remove frozen breast milk from the freezer several hours before it is needed and thaw it in the breast milk fridge.

Frozen breast milk can be defrosted quickly by holding it under tepid running water.

Do not defrost breast milk in the microwave.

Never refreeze breast milk once thawed.

Defrosted breast milk can only be stored in the breast milk fridge for 24 hours.

• What do I need to know when transporting fresh / frozen breast milk to and from the hospital?

Breast milk should be transported to or from the hospital in:

- upright express breast milk bottles
- an insulated container / cold box with coolant block.

This helps to keep the breast milk cool

Transport the breast milk directly to the ward/unit area and give it to the nurse looking after your baby, so they can store it in the appropriate fridge or freezer.

Don't forget to label the bottle correctly

My baby is starting back on feeds, which breast milk will they receive?

If your baby has been fasting for a period of time and is allowed to start back on breast milk but is not well enough to feed directly from the breast, they should receive:

- Fresh / frozen (colostrum) breast milk supplies first, (if available) then
- Fresh breast milk, then
- Frozen breast milk (starting with the oldest frozen breast milk supply in the freezer (but no older than 3 months), and working towards the most recently frozen expressed breast milk supply)

Why does my breast milk need to be fortified?

Your breast milk is a perfect source of nutrition for your baby. However, when babies are sick, premature or have a poor weight gain, they may have extra nutritional needs. If additions are needed, these will are prescribed by your dietician.

They will be added to breast milk in the form of fortifiers, either:

- Preterm breast milk fortifiers available in sachet form
 - for preterm or low birth weight infants only
 - added at ward / unit level by your baby's nurse
- Term breast milk fortifiers added in the Formula Room

Breast milk fortifiers can help babies improve growth and can prevent some nutritional deficiencies. Your dietician will discuss with you the need to start fortifying your breast milk and the length of time it is needed for.

• Will I always have to tube feed my baby?

Not always, it depends on your baby condition; ask the nurse / doctor caring for your baby. The best thing you can do for your baby until he/she can breastfeed at your breast, if this is your intention, is to increase your breast milk supply by adequate pumping.

It is easier for your baby to learn to breastfeed when you have a good flow of breast milk.

• What do I do with extra breast milk?

If you are pumping more breast milk than your baby needs, you can:

- Store it in the freezer, and use it at a later date
- Donate it to a Human Milk Bank

What is a Human Milk Bank?

A Human Milk Bank is a service which collects, screens, processes and dispenses human breast milk donated by nursing mothers. These nursing mothers are not the parents of the receiving infant. The human milk bank that provides donor breast milk for OLCHC is called 'Sperrin Lakeland Human Milk Bank'. This bank is situated in Irvinstown, Co. Fermanagh and is overseen by the United Kingdom (UK) Association of Milk Bank Guidelines and the National Health Service 'NHS' in the UK.

For more information about Human Milk Banks, please contact: http://www.ukamb.org

How do I wean correctly?

Firstly, congratulation for breastfeeding and/or expressing for as long as you did. Weaning starts when your baby begins to take anything other than breast milk and it is a natural stage of any baby's development. Despite your reasons for weaning, **gradual planned weaning** will be the easiest on both yourself and your baby.

Gradual planned weaning means stopping one breast feed or time you express per day every 2-3 days. This allows your breast milk supply to decrease slowly, without causing breast fullness or discomfort. It will also give you time to make sure your baby is adjusting well to their change to formula milk.

For further advice about weaning, ask your baby's nurse.

How will I look after myself while expressing?

It is important that you maintain a healthy diet and lifestyle, for both you and your baby while in hospital.

You should:

- Get enough rest and sleep so that you have energy to care for both your baby and yourself.
- Eat a healthy diet. Eat regular meals.
- Drink to thirst.
- Avoid alcohol. Alcohol does pass into breast milk so ideally keep your drinking within the limits recommended for pregnant women which is no more than one or two units per week. Extra alcohol of any type will not increase your milk production and may reduce it.
- Avoid smoking. If you smoke cigarettes your breast milk will contain nicotine and it may slow down your flow of breast milk and/or decrease your breast milk supply. If possible reduce the amount you smoke and do not smoke immediately before you express breast milk or breastfeed.

• Renting or buying a breast pump

There are many types of breast pumps produced. They are available to either buy and/or rent. OLCHC provides hospital grade electric breast pumps for use within the hospital. If you need one at home they are available along with many other types from "Medicare Health and Living". Their contact details are:-

Address: Glencormack Business Park, Kilmacanogue, Co. Wicklow. Phone: (01) 2014900

If you have or would like to use another type of breast pump while in hospital, follow the manufacturer instruction booklet for direction on its use and ask the nurse caring for your baby for advice and guidance.

You can claim tax relief for the rental or purchase of a breast pump through the 'MED 1 Health Expenses' form under the section called 'Expenses incurred on any medical, surgical or nursing appliance'. For more information contact:- www.revenue.ie

If your baby was born prematurely in Ireland, Medicare has kindly agreed to give a 12.5% discount on breast pump rentals. Please quote the 'Irish Premature Babies' Organisation with their sales staff when renting your breast pump.

Always remember, if you have been expressing you can start or restart breastfeeding whenever your baby is able. Please do not hesitate to talk to your nurse.

If you have any concerns or further questions regarding expressing breast milk. Please do not hesitate to talk to your nurse.

Reference List

Gotsch, G (1999) Breastfeeding your premature baby, Le Leche League International, London.

King, C. and Jones, E.A. (2005) Feeding and Nurtition in the Preterm Infant, Elsevier London.

Morton, J.; Hall, J.Y.; Wong, R.J.; ThairuL.; Benitz, W.E. and Rhine, W.D. (2009) Combining hand techniques with electric pumping increases milk production in mothers of preterm infants, Journal of Perinatology, 29, 757-764.

West, D. and Marasco, L. (2009) The Breastfeeding Mother's Guide to Making Milk, McGraw Hill, London.

Baby Friendly Hospital Initiative in Ireland	www.ihph.ie/babyfriendlyinitiative/
Health Promotion Unit	www.breastfeeding.ie
La Leche League	www.lalecheleague.org
Cuidiu	www.cuidiu-ict.ie
'Irish Premature Babies' Organisation	www.irishprematurebabies.com
Donor Milk Banks	www.ukamb.org
On line breastfeeding retail supplier	www.onceborn.com
Medela breast pump suppliers	www.medicare.ie
Other Use	ful Websites
Central Revenue Information Office	www.revenue.ie

Notes:	

Document Number:	Approved By: Nurse Practice Committee (NPC)
Edition Number:	Date of Approval:
Number of Copies:	Ratified By: Geraldine Regan, Director of Nursing.
	Signature:
Responsibility for this Document: NPC	Date of Ratification:

^{© 2011,} Our Lady's Children's Hospital, Crumlin, Dublin 12. All rights reserved. No part of this publication may be reproduced, stored in a retrieval system or transmitted in any form or by any means without the prior written permission of the copyright holder. Our Lady's Children's Hospital makes no representation, express or implied, with regard to the accuracy of the information contained in this publication and cannot accept any legal responsibility for any errors or omissions that may be made.